|                      | Application/Control No. | Applicant(s)/Patent Under Reexamination |
|----------------------|-------------------------|-----------------------------------------|
| Issue Classification | 10650935                | BRUGGER ET AL.                          |
|                      | Examiner                | Art Unit                                |
|                      | Kim, John               | 1723                                    |

| CLASS   SUBCLASS   S   |                |                |          |          | 1          |           |       |          |      |        |        |            |     |             |            |                   |
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| CLASS   195.2   SUBCLASS   FR ELOCK)   A 6 1 1 D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                |                | ORI      | GINAL    |            |           |       |          |      |        |        | ERNATIONAL | CLA | SSIFICAT    | NOI        |                   |
| 165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.2   165.   |                | CLASS          |          |          |            | SUBCLASS  |       | <u> </u> |      |        | CLAIME |            | L   | ON .        | N-CLAII    | MED               |
| CROSS REFERENCE(S)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 210            |                |          | 195.2    |            |           |       | В        | 0    | -      | D      | 61 / 28    |     |             |            |                   |
| 194   195.1   252   253   257.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                | CROSS RE | FEREN    | CE(S)      |           |       | ∢        | 9    | -      | Σ      | 1/14       |     |             |            |                   |
| 194   195.1   252   253   257.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CLASS          |                | SUBCLASS | (ONE SUE | 3CLASS PI  | ER BLOCK) |       |          |      | 1      |        |            |     |             | ļ <u>-</u> |                   |
| 256   321.6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 210            | 194            | 195.1    | 252      | 2          | 53        | 257.1 |          |      |        |        | :          |     |             |            |                   |
| 1.01 6.09  ant Examiner)  (Pate)  (Primary Examiner)  (Primary Exa | 210            | 258            | 321.6    |          |            |           |       | <u> </u> |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 604            | 4.01           | 6.09     |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| Int Examiner) (Date) (D |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner) (Date)    Comparison                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |                |          | - T      |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner) (Date)    Machine High High High High High High High High                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)    Coate   Coate |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)  (Date)  (Date)  (Primary Examiner)  (Date)  (Primary Examiner)  (Date)  (Primary Examiner)  (Date)  (Primary Examiner)  (Date)  (Aprimary Examiner)  (Date)  (Aprimary Examiner)  (Aprimary Examiner |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)  (Date)  (Primary Examiner)  (Date)  (Primary Examiner)  (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)  (Date)  (Date)  (Primary Examiner)  (Date)  (Primary Examiner)  (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)  (Date)  (Date)  (Date)  (Primary Examiner)  (Date)  (Date)  (Date)  (Date)  (Date)  (Date)  (Date)  (Date)  (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |                |          |          |            |           |       |          |      |        |        | ;          |     |             |            |                   |
| Coate   Coat   |                |                |          |          |            |           |       | _        |      |        |        |            |     |             |            |                   |
| Total Claims   Tota   |                |                |          | -)       |            |           |       |          |      |        |        |            |     |             | _          |                   |
| Total Claims   Tota   |                |                |          |          |            |           |       |          |      |        |        |            |     |             |            |                   |
| ant Examiner)         (Date)         Total Claims           15         15           16         11/20/06         O.G. Print Claim(s)           13         13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                |          |          |            |           |       |          |      |        | -      |            |     |             | _          |                   |
| Total Claims (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                |                |          |          |            |           |       | +        |      |        |        |            |     |             |            |                   |
| (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | NONE           |                |          |          |            |           |       |          | $\ $ |        |        |            |     | Total C     | laims A    | llowed:           |
| (Date) (Primary Examiner) (Date) (Date) (Date) (Oate) (Oate) (Oate)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (Assistant Exa | Iminer)        | (Date)   |          |            |           |       |          |      |        |        |            |     |             | 15         |                   |
| (Date) (Primary Examiner) (Date) 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Maria          | W/W            | 12/// *  | 100      | John Kim/  | Blin      | tan   | :        |      | 11/20/ | 90     |            | 0.6 | Print Claim | <u> </u>   | O.G. Print Figure |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (Legal Instrum | ents Examiner) | 7        | <u> </u> | Primary Ex | aminer)   |       |          |      | Date)  |        |            |     | 13          |            | 8 <b>A</b>        |

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